

U.S. Patent Application Serial No. 09/716,545 Attorney Docket No. 03226.049001; P5243

STATES PATENT AND TRADEMARK OFFICE

Applicant:

Gajendra P. SINGH

Art Unit: 2154

Serial No.:

09/716,545

Examiner: L. DONAGHUE

Filed:

November 20, 2004

Confirmation No.: 7006

Title:

THREAD SWITCH CIRCUIT DESIGN AND SIGNAL ENCODING FOR

VERTICAL THREADING

RECEIVED

Commissioner for Patents

P.O. Box 1450

OCT 1 4 2004

Alexandria, VA 22313-1450

Technology Center 2100

PETITION TO CLAIM BENEFIT UNDER 35 U.S.C. § 120

The present application has been amended, by way of the Response to the Office Action of July 6, 2004 enclosed herewith, to claim the benefit of the filing date of U.S. Patent Application Serial No. 09/638,338. The present application (i) was filed during the pendency of U.S. Patent Application Serial No. 09/638,338, (ii) has at least one inventor in common with U.S. Patent Application Serial No. 09/638,338, and (iii) is supported by the disclosure of U.S. Patent Application Serial No. 09/638,338. Accordingly, Applicant respectfully requests entry of the benefit claim under 35 U.S.C. § 120.

The appropriate petition fee is enclosed.

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U.S. Patent Application Serial No. 09/716,545 Attorney Docket No. 03226.049001; P5243

Please apply any charges not covered, or any credits, to Deposit Account 50-0591 (Reference Number 03226.049001; P5243).

Respectfully submitted,

Date: 10/4/

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OSHA & MAY L.L.P.

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PTO/SB/17 (10-03) gh 7/31/2006. OMB 0651-0032

Under the Paperwork Reduction Act of 1995 to persons are requ	ired to	respond	U.S. Pa	etent an		oved for use inrough 7/31/2006. Or ark Office; U.S. DEPARTMENT OF on unless it displays a valid OMB co		
MANIEUM	Complete if Known							
FEE TRANSMITTAL	•	Appli	cation	Numbe	er	09/716,545-Conf. #7006	5	
for EV 2004		Filing	Date			November 20, 2000		
for FY 2004			Named	Inven	tor	Gajendra P. Singh		
Effective 10/01/2003. Patent fees are subject to annual revision.		Examiner Name			Larry D. Donaghue			
Applicant claims small entity status. See 37 CFR 1.27		A-4 1 1	nia.			2154		
TOTAL AMOUNT OF PAYMENT (\$) 130.00		Art Unit Attorney Docket No.).	03226/049001; P5243			
		FEE CALCULATION (continued)) - . -	VED		
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Deposit Account Osha & May L.L.P.	1051	130	2051	65	Surcharg	e – late filing fee or oath		
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharg sheet.	e - late provisional filing fee or cove	or[
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		lish specification		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2.520	•	a request for ex parte reexamination		
	1804	-	1804	920*	Requestia	ng publication of SIR prior to	-	
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to the above-identified deposit account.	1805		1805		Examiner	raction		
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1. BASIC FILING FEE Large Entity Small Entity	1252 1253		2252	210 475		n for reply within second month n for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254		2254			n for reply within fourth month		
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255		2255			n for reply within fifth month		
1002 340 2002 170 Design filing fee	1401		2401		Notice of			
1003 530 2003 265 Plant filing fee	1402		2402	165		rief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request	for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to	o institute a public use proceeding		
SUBTOTAL (1) (\$) 0.00	1452		2452	55		o revive – unavoidable		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501		2501	665	•	ue fee (or reissue)	— —	
Claims below Fee Paid	1502		2502	240	Design is		\vdash	
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Claims 3 3 3 2 X	1460		1460			to the Commissioner	130.00	
Multiple Dependent	1807		1807	50		ng fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180		ion of Information Disclosure Stmt		
Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40	property	(times number of properties)		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385		ubmission after final rejection 1.129(a))		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		additional invention to be d (37CFR 1.129(b))		
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385		for Continued Examination (RCE)		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900		for expedited examination gn application		
and over original patent	Othe	r fee (spe	cify)					

SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid	SUBTOTAL (3) (\$) 130.00
SUBMITTED BY		(Complete (if applicable))
Name (Print/Type) Jonathan P. Osha	Registration No. (Attorney/Agent) 33,986	Telephone (713) 228-8600
Signature		Date October 4, 2004

Other fee (specify)

I hereby certify that this correspondence in an envelope addressed to: Commission	s being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV526070325US, ner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.
Dated: October 4, 2004	ner for Patents/P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Signature: (Beri W. Hartwell)